

AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

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In re Application of: DR Paul K. Prontkowski		
Application No. 10/646 929		
Filed: Aug. 25, 2003		
Title: Stereo Microscope		
Attorney Docket No.	Art Unit: 2	872
The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:		
Name		Registration Number
CARROLL B. DORITY		33148
This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.		
SIGNATURE of Practitioner of Record		
Signature		Date 9/29/04
DR Paul K. PIONTKOWSKI		Registration No., if applicable
Telephone (703) 768-7278		

This form offers a sample or suggested format for an authorization for an agent. See MPEP § 713.05 for more information. This sample form is not an OMB officially approved form.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.